**Iowa Department of Human Services**
**CHILD CARE CENTER EVALUATION AND RECOMMENDATION FOR LICENSE**

**Name of Center:** Glenwood Head Start **Enrollment:** 40 **License ID No. (Reapplications)** 52649

**Street:** 302 West Madison St **City:** Mt Pleasant Iowa **Zip** 52641 **County:** Henry

**Mailing Address:** 2850 Mt Pleasant StSte 108, Mt Pleasant, IA, 52601

**Director's Name:** Matthew LeClere **Phone Number:** 319-201-1560

**On-Site Supervisor(s):** Keli Morgan **E-Mail:** Matthew.LeClere@caofseia.org

**Date(s) of Visit:** 07-02-2025

**Licensing Visit** X **Unannounced Visit** X **Off Year Visit** **Administrative Change**

**LICENSING VISITS**

X **New Application** **Re-Application** **NA**

**Signed Application (470-0722) Received** X **Yes** **No** **NA** **Date Signed:** 09-20-2024

**FIRE INSPECTION** X **State** **Local** **NA** **Is Fire Inspection Approved?** X **Yes** **No** **NA**

**Date Inspected:** 10-02-2024

**Comments :** due every three years, performed by State Fire Inspector

**LICENSE TYPE:** X **Child Care** **Preschool (ages 3-5 meets three hours or less per day)**

**Financial Type:** Profit X Non-Profit NA

**Accredition:** Accredited NAEYC NSACA X Other NA

**Program Serves:** X Infants (0-23 mo.) X 2 Years X Preschool-Age School-Age

Get-Well Evening Care Special Needs

**SCHEDULE:** X Year-round School-Year Summer Only

| **HOURS:** | *Year-round* | *School-Year* | *Summer Only* |
|---|---|---|---|

| LICENSE CAPACITY | Infants | 2 Years | Preschool | School-Age | Capacity |
|---|---|---|---|---|---|
| General | 8 | 8 | 38 | | 54 |
| Summer | | | | | 0 |

**QRS Rating:** N/A

| RECOMMENDATION FOR LICENSE: | |
|---|---|
| X | **FULL** license from 09-01-2024 to 09-01-2026 |
| | **PROVISIONAL** license from |
| | **DENIAL** of initial application |
| | **SUSPENSION** of license |
| | **REVOCATION** of license |

**Licensing Consultant:** Jill Seibert **Date:** 07-23-2025

**I. IF CURRENT LICENSE IS PROVISIONAL, IDENTIFY THE CORRECTIVE ACTIONS**

**II. IDENTIFY THE AREAS OBSERVED ON THE VISIT:**

Glenwood Head Start is located in a remodeled building in central Mt. Pleasant. The building contains traditional preschool age Head Start program and an Early Head Start program for infants and toddlers. The center is owned and operated by Community Action of Southeast Iowa, a not for profit community action corporation. Matt LeClere, Ed.S. is the Director Head Start/Early Head Start Community Action of Southeast Iowa (2020). Mr LeClere has a BA in Elementary Education, a BS in Education Administration, with an endorsement in Special Needs. He worked for many years (18+) in the capacity of teacher and principal at a public school district. Director LeClere supervises several Head Start/Early Head Start programs in south east Iowa counties Des Moines, Henry and Lee. He is based out of central office in Burlington and began as Director in 2019. This center has been licensed since 1984 in another location in Mt. Pleasant under the name Henry County Head Start.

A person designated as in charge/ on-site supervisor is Keli Morgan (Family Development Specialist). On past visits I met with OSS Morgan, Jennifer Mehmert, OSS, or Amy VanDiver. Health Coordinator. Monica Maddox oversees the EHS portion of the program. An OSS request can be sent to HHS through IPOWER to have Ms. Maddox approved as an OSS.

On 9/17/25 I made an unannounced off year visit to Glenwood Head Start and met with FDS/OSS Keli Morgan. All program areas were observed at that time. I also met with other staff members present (teachers, aides, kitchen staff, volunteers). The visit consisted of classroom and building area review and observations of activities, ratios, nutritional practices, health and safety practices, playground observation, field trip and transportation practices, and administrative review. At the time of the visit, staff was actively engaged in providing the Early Head Start program to the children. I have phone contact with Director LeClere throughout the year.

The programs can only be accessed by first entering the front doors. When a visitor arrives they must enter the front door, as all other doors are locked. Head Start and Early Head Start staff will greet visitors at the front entrance. Every child must be signed in by the parent or authorized adult.

The Center Handbook contains the mission statement of the local Head Start Program: "Head Start - A program where children and families are educated, challenged and empowered to embrace their potential for success in life. One child, one family at a time."

Philosophy: The overall philosophy of the Early Head Start/Head Start Program is to bring about a greater degree of social competence in children of low-income families. Social competence means the child's everyday effectiveness in dealing with both the present environment and later responsibilities in school and in life. Social competence takes into account the inter-relatedness of cognitive and intellectual development, physical and mental health, nutritional needs as well as other factors.

To achieve social competence, Early Head Start/Head Start performance standards provide for:
* Improvement of the child's health and physical abilities, including appropriate steps to correct present physical and mental problems and to enhance every child's access to an adequate diet.
* Improvement of the family's attitude toward future health care and physical abilities.

* Encouragement of self-confidence, spontaneity, curiosity and self-discipline that will assist the development of the child's social and emotional health.

Program Observations:

All classrooms are clean, bright, attractive and equipped with a satisfactory variety of child sized furniture, equipment, toys, games, and activities for the children. Both classrooms are self-contained with their own restrooms, food preparation areas, and outdoor exits. The preschool age Head Start classroom employs Creative Curriculum. Interest centers available to the children include: blocks, children's literature, dramatic play, toys and games, puzzles and small manipulatives, art, music and movement, science and discovery, sensory tables, and computer area.

The Early Head Start area contains a Library Center, small tables and chairs.

Windows provide ample natural light. We discussed Safe Sleep practices. A hand washing sink is located next to the changing table, which faces the children. Ratio was met and maintained in the building throughout the visit.

The Head Start building is open with an ample amount of natural and fluorescent lighting. Air conditioning is provided. Air quality and room temperature was adequate the day of the visit.

Center Nutrition Practices Observed:

Meals and snacks for the center are prepared onsite by center nutrition staff. Meals are served in the classrooms family style and menu patterns indicate that minimum nutritional requirements are met. The Early Head Start area has a small kitchen area for infant meal and bottle preparation. A large refrigerator is in the meal preparation area. I observed the unit and thermometers were located in the unit. No open food items were found. Dry food was not stored on the floor, but in cabinets. No expired food items were observed. Dry food was stored adequately and closed if previously opened. Breast milk was labeled and stored appropriately. Any Food Allergy Alerts will be posted in kitchen areas in both parts of the building.

Staff sit with children at child sized tables. Napkins were provided.

Food waste containers were covered. Two thermometers were located in the refrigerator/freezers in each room. Cold food was stored adequately. Dry food was stored in cabinets and cupboards. All kitchen areas were observed to be clean. No food was stored on the floor.

Center Health and Safety:

Policy and procure are in accordance with rules regarding medication storage and administration. The center administers prescription and non-prescription medication in accordance with licensing regulations, physician directions, and parental consent. A quiet/sick area is designated as the "library area". Medication is kept in a high cabinet out of reach of the children. All medication had an intact pharmacy label and documentation to accompany it. Any medication should be dispensed by staff who have taken the medication administration course.

Storage and maintenance of a first aid kit were compliant. A clearly marked First Aid Kit was on top of the refrigerator. A mobile backpack first aid kit was kept by the exit.

Compliance with environmental testing and the maintenance of any necessary detection equipment were reviewed. All electrical outlets were covered. Radon testing should be completed with results under 4 pCi/L. Updated testing is due every 5 years. The building is on city water so a water analysis is not required. The building was constructed after the 70s therefore does not require lead based paint testing. A fuel burning inspection is required annually.

We reviewed and discussed compliance with general regulations regarding safety policies and procedures. Cleaners are located in the bathroom in a cabinet or in high places inaccessible to children.

Staff belongings are stored in a locked cubby in the entryway and a locked cabinet in the food preparation area. Ratio was met and maintained the day of the visit.

Michelle Stafford is the new maintenance person for this building. We discussed capacity will need to be adjusted to ensure every child has 35 square feet of useable floor space in rooms without cribs. In rooms with cribs each child must have 40 square feet of useable floor space. The area must be measured again to ensure each child has a minimum area of 35 square feet of usable floor space. Storage space, kitchen space and teacher space cannot be counted.

Regulations regarding emergency plans and drills for fire and tornado were reviewed. Documentation indicating both drills will be completed monthly were present.

Sanitation policies and procedures were reviewed. Toothbrushes are stored in a netting and were appropriately spaced in the holder. A chart was next to the toothbrushes with documentation of toothbrush holder cleaning and the dates. The center is utilizing Oxivir TB as a disinfectant.

A diaper changing station was observed to be clean and free of clutter. The center has separate containers for soiled diapers and other garbage. I observed staff wearing gloves when necessary. All food waste containers were covered. Hand washing posters were by the sink. The paper towel dispenser was appropriate.

The center is in compliance with regulations regarding child and staff hand washing. Hand washing routines on both sides of the building were followed per protocol.

Center Playground:

The center has separate outdoor play areas for toddlers and preschool age children in front of the center. Both areas are fenced but lack natural shade. The building provides some shade during certain hours of the day. The toddler play area has low, climbing and activity toys. The preschool age area has a large, anchored, metal/plastic climbing and activity toy and tricycles. Both play areas are completely cushioned by rubber matting. Several other plastic climbing toys were located in the area. Each child must have at least 75 square feet of space when engaging in gross motor activities.

A small shed is located within the play area for extra storage. New storage bins were purchased this past year as well as a bench and cabinetry.

I observed a Daily Playground Safety checklist that was complete. It remains the program's responsibility to ensure the playground meets standards put forth by the US Consumer Product Safety Commission (CPSC) in the "Public Playground Safety Handbook" (which can be accessed online at the following website: http://www.cpsc.gov. The Child Care Weather Watch is utilized if outdoor play is questionable due to varying weather conditions.

Center Transportation Arrangements/Field Trips:

The center provides no transportation for children to or from the daily program. A school bus vehicle owned and operated by Community Action of Southeast Iowa is used for field trip transportation only. Maintenance logs for the vehicle are kept at the main site. The handbook contains 10 Bus Rules in relation to pick up and departures to and from Head Start.

Center Administrative Records:

Child misbehavior is addressed by modeling, verbal reminders of appropriate behavior, and redirection. The center is in compliance with regulations regarding required postings and notices and required. Staff and child files are complete and well organized. The Emergency Procedures Guide, First Aid, the Fire/Tornado Drill Report (which was completed), Universal Precautions, and Emergency Contact Information were posted in the Toddler room inside the main door. Evacuation procedures were posted by the back door.

A main Parent Information Board will be hung in September. It will contain the calendar for the program, their daily routine the lesson plan, a mandatory reporter posting, certificate of license and licensing consultant information. Emergency evacuation procedures will be posted this moth. A No Smoking sign is on entry doors. I observed class schedules.

Reviewed written policies are provided to parents in the form of a parent handbook. The Parent Handbook is 32 pages long and contained Health Policies, Parent Policies (which contained an unlimited access policy, Education Services, Health Services, Classroom Policies, Safety Policies among other). An Illness and Exclusion Policy is included in the handbook. Evacuation of immobile children policies are present.

The Licensing book contains a Universal Precautions procedure and policy, the behavior/child guidance policy, and classroom rosters. Staff files are kept in the main office. Alicia Lovewell is the new Data Specialist who assisted me with staff credentials on 7/22/25. Staff were up to date on physicals, Iowa Criminal Background checks, Fingerprints and all training including Mandatory Reporter, CPR/First Aid and professional development. No staff employed at the center are under 18 years of age. Staff are mostly compliant with CPR/1st Aid training (every 2 years). Mandatory Reporter Training (every 3 years), updated staff physicals (every 3 years), updated SING checks (every 2 years) and updated fingerprints (every 4 years). It is duly noted that this program has had an excellent history of record keeping/staff requirement compliance the past 10 years. HHS is no longer required to track Universal Precautions training. One staff is behind on CPR. This will be rectified this month.

Child files including updated physicals, immunizations, medical and dental information, pick up authorizations and field trip authorizations are reviewed annually.

Allergy Action Plans were filed for each child as well as being available for reference in the room the child receives care. A Daily Health Check is conducted on each child as they enter the bus or classroom. If the child appears to be ill they will be sent home. All children had necessary documentation in files such as emergency contacts, physical exams, and immunizations.

The Emergency Preparedness Plan for this site has not been written since the program just relocated. Signatures and dates indicating staff completed Emergency Training procedures annually should occur when the plan is completed. It wil be kept in the HHS Licensing Book. All mandatory postings should be present so that parents can observe them. 911 and Poison Control numbers are posted by the phone. Diagrams for emergencies should be posted by each door. All postings will be completed by the end of September.

**III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:**

The programs meet a need in the community.

Staff and administration are helpful, knowledgeable and friendly.

**IV. IDENTIFY THE ASPECTS OF OPERATION THAT FALL BELOW THE STANDARDS REVIEWED:**

**V. SPECIAL NOTES/RECOMMENDATIONS:**

The program may meet with CCR&R and IDPH to go over the licensing checklist at regular intervals. The program should meet with CCR&R and IDPH on a regular basis throughout the year, to ensure consistency and compliance.

The preschool has regular collaboration with CCR&R (Jodi Norton) and IDPH CCNCs (Mandi Lauderman or Tammy Merrill) to ask for assistance in maintaining licensing regulations throughout the year.

Based upon this review, it is recommended that this program begin in Full licensing status. The center is directed to continue to monitor day to day practice and adjust accordingly to continue to ensure licensing rule is met consistently. It is important to note, all HHS licensing standards and procedures must be maintained during the renewal period.

HHS encourages you to contact your local nurse consultant. Child Care Nurse Consultants work with child care and early education businesses. Businesses may call or send questions to a child care nurse consultant about health and safety policies, health programs, health of personnel, and specific child health or safety issues. Please visit the following website for more information. http://idph.iowa.gov/hcci/consultants. Iowa Department of Public Health Child Care Nurse Consultants can perform an Injury Prevention Checklist both outside and inside. This has been conducted in the past. CCNC Lauderman visits the program on a regular basis. She looked at the playground, immunization audit, handwashing training, universal precautions training. Prior to the HHS visit CCNC Lauderman observed the outdoor play area.

HHS encourages you to contact Child Care Resource and Referral consultant. They offer centers assistance with meeting the DHS regulations, QRS, infant/toddler concerns, room arrangement and environment, developmental concerns, Best Practice information, CDA assistance, or any questions or concerns you may have. Please visit the following website for more information: http://www.iowaccrr.org Malia Love is the facility consultant.

*Note: If you are the Child Care Center Director and you feel something is unclear or unjustly cited, please contact your DHS Licensing Consultant to discuss the issue. The child care director may also send a response which will be placed in the licensing file.

*Note: If you are a member of the general public, there may be additional information contained in the public file. You may contact the DHS Licensing Consultant to inquire.